



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: THE CENTER FOR MINIMALLY INVASIVE SURGERY

Street Address: 9200 Calumet Ave, Suite S200

City: Munster

County: Lake

Administrator Name: Lisa Davis

Administrator Email: lisa.davis@cmisurgery.net

ASC Web Address: www.cmisurgery.net

Fiscal Year: 2020

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	961	4448
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
29827	51	
29881	58	
64635	37	
63047	33	
64483	224	
64490	25	
64493	78	

62321	50
62323	72
42821	24

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
--	---